**Statement of Patient Responsibilities**

1. Provide accurate and complete information about your past illnesses, hospitalizations, medications and other matters relating to your health, and answer any questions concerning these matters.
2. Participate in your health care planning by talking openly and honestly about your concerns with your physician and other health care professionals.
3. Understand your health problems, treatment course and care decisions to your own satisfaction and ask questions if you do not understand.
4. Cooperate with your physician and other health care professionals in carrying out your health care plan both as an inpatient and after discharge.
5. Participate and cooperate with our health care professionals in creating a discharge plan that meets your medical and social needs.
6. Inform the hospital or any of its professionals of the existence of any advanced directive (proxy, DNR, living will) you have created.
7. Take responsibility for the consequences and outcomes if you do not follow the care, service or treatment plan.
8. Provide accurate information related to insurance or other sources of payment. You are responsible for ensuring payment of your bills and you may be responsible for charges not covered by your insurance.
9. Treat other patients, visitors and staff with respect and consideration. Support mutual consideration and respect by maintaining civil language and conduct in interactions with staff and providers.
10. Follow instructions, policies, rules, and regulations in place to support quality care for patients and a safe environment for all individuals in the hospital.

Be considerate of your fellow patients, respecting their need for privacy and a quiet environment.